										Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECOR									10/756820						
		Elleci	IVE OCIOO	61 1, 20)U3									-	
		CLAIMS AS	. EP		OR	OTHER SMALL									
ŢC	TAL CLAIMS		48		٠,			RAT	E	- PEE	·	RATE"	FEE.]	
FO	R		NUMBER FILED		NUMBER EXTRA			BASIC	EE	385.00	OR	BASIC FEE	770.00	7	
TO	TAL CHARGEA	BLE CLAIMS	48 minus 20=		. 28			XS 9		25200	OR	X\$18=		1	
IND	EPENDENT CL	AIMS	6 minus 3 =		· 3			X43:	_	129-00		X86=		1	
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					-145	_	0	OR	+290=		1	
* If the difference in column 1 is less than zer J. anter "0" in column 2								TOTA		H6-0			•	1	
	C	LAIMS AS A		1	,	•	OTHER	THAN	7						
	<i>,</i>	(Column 1)	(Column 2) (Column 3)				SMA	L	NTITY	OR	SMALL	•			
AMENDMENTA	100) plins	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVK PAID	BER DUSLY	PRESENT EXTRA		RATI	(11	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
OME	Total		Minus	**	:			XS 9			OR	XS18=			
ME	Independent	•	Minus	***				X43			OR	X86=		1	
PIRST PRESENTATION OF MULTIPLE DEPENDENT COMM											OR	+290=		1	
1, 15, 23, 31, 40, 48,								+145			OR	TOTAL		1	
									EE		On	ADDIT. FEE		1	
	(Column 1) (Colum CLAIMS HIGH								-	ADDia:			ADDI-	-	
AMENDMENT B	3A.	REVAINING AFTER AMENDMENT		PREVI	OUSLY	PRESENT EXTRA		RATE		TIONAL		RATE	TIONA		
	Trital	· 35	Mirus	- Y	8	- O	1	XS 9	_	7	OR	XS18=	1	7	
	Independent	. 5	Minus		0	1-0	1	\-3:			OR	. X86 ₇		7	
	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	ENDEN	CLAIM		ן נ	- • ∸5	_	1	OR	+290=	1	1	
									AL	-		TOTAL	H	土	
	2/6/0		<u> </u>	EE		JOH	ADDIT. FEE	4	1						
	-100	CLAIMS	,	(Colu	mn 21 Æ51	-Coiumn 3- I	٦.	·	,	455	i		400:	4	
AMENDMENT C	•	REMAINING AFTER AMENDMENT		PREVI	BER	PRESENT		= 47	Ξ.	ADDI- TIONAL FEE		RATE	ADDI- TIONA FEE	VL.	
δ	Total	· 28.	Minus	- (/	X	- 0].	X5 9	=		OR	X\$18=		1	
AME	Independent	· 4	Minus	tes	(0	•		X13:	<u>.</u>		OR	X86=		1	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										. 1		.000	1	7	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3								- 145			OR	+290=		4	
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3 enter "2."								TOT ADDIT. F			OR	TOTAL ADDIT FEE	L_ _	_	
	ii ina "Highesi Nu The "Highesi Num	mber Previously Pa aber Previously Pai	no ror in THI d For" (Total o	o space Independ	euti es tua es sess tua	n 3 sitter 3 highest numbi	er fou	ind in the	app	propriate box	c en co	omn 1.	V	1	
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